

DESCRIPTION OF STAFF MAKING ELIGIBILITY DETERMINATIONS

The local District Offices of the Social Security Administration make the Medicaid eligibility determinations for the following groups of individuals:

1. SSI beneficiaries
2. Mandatory state supplementation recipients
3. Optional state supplementation recipients in the following categories:
 - a. Blind supplementation
 - b. Family Life Home supplementation
 - c. Dependent Person supplementation
4. Persons in medical institutions whose income is such that they would be eligible for SSI if residing outside the institution if application for SSI is made during the month of entrance to the medical institution (initial eligibility determination only).
5. Persons considered to be SSI recipients under 1619a and 1619b.

The local county offices of the Department of Human Services make the Medicaid eligibility determinations for the following groups of individuals:

1. Persons who become ineligible for SSI because of Social Security cost-of-living increases (Section 503 Medical Only).
2. Persons in medical institutions who would be ineligible for SSI if residing outside of the institution because of excess income (300%) cases.
3. Persons in medical institutions who would be eligible for SSI if residing outside of the institution but who have not applied for SSI during the month of entrance to the medical institution.
4. Individuals who lost eligibility for cash assistance because of OASDI increases in October 1972.

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5. Optional state supplementation recipients in the following categories:
 - a. Residential Care Facilities
 - b. In-Home-Health Related Care
6. All AFDC-related individuals
7. Institutionalized individuals who were eligible in December 1973
8. All Medically Needy cases
9. Waiver cases
10. Other SSI-related cases
11. Foster care cases
12. Subsidized adoption cases
13. Poverty level pregnant women, infants and children
14. Continuously eligible pregnant women
15. Qualified Medicare beneficiaries
16. Qualified disabled and working persons
17. Specified low-income Medicare beneficiaries
18. People ineligible for SSI due to reevaluation of childhood disability
19. Qualifying individuals in special group 1
20. Individuals who have been screened and diagnosed by the Breast and Cervical Cancer Early Detection Program and are in need of treatment for breast or cervical cancer or a precancerous condition of the breast or cervix.
21. Medicaid buy-in (MEPD) – under the Balanced Budget Act of 1997 provisions.

Presumptive Medicaid eligibility determinations for pregnant women are made by providers who meet the definition of “qualified provider” in accordance with Section 1920B of the Social Security Act.

Presumptive Medicaid eligibility determinations for women diagnosed with breast or cervical cancer or a precancerous condition are made by providers who meet the definition of “qualified entity” in accordance with the Breast and Cervical Cancer Prevention and Treatment Act of 2000.

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